.....on the (Date)



FIRST NEWFOUNDLAND REGIMENT

Ouestions to	to be put to the Regretit before Enlistment.
I. What is your name?	James Joseph Sowlett
2. What is your full Address?	a the told Road
3. Are you a British Subject?	
4. What is your age?	
5. What is your Trade or Calling?	
6. Are you Married?	
 Have you ever served in any Bran jesty's Forces, naval or military, 	anch of His Ma
8. Are you willing to be vaccinated?	ated or re-vac-)
9. Are you willing to be enlisted fo vice?	or General Ser-)
10. Did you receive a Notice, and d stand its meaning, and who gave	do you under-} 10. Name
그 그 그 없었다. "아이지의 아이들이는 이 사람이 되었다면서 바다 하는데 어디를 하고 있다고 있다. 그리고 없다고 있다고 있다.	conditions as embodied in the roll of service
wood you	Charle Cunt
I. Change Ji Jin	BE CAREN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful george the Fifth, His Heirs and Successors, and that I will, as in d
I A Majesty King oound, honestly and faithfully defend Hi lil enemies, according to the conditions	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful george the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity again of my service.
I	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful george the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity against of my service.
I Jean True allegiance to His Majesty King pound, honestly and faithfully defend Hi ill enemies, according to the conditions CERTIFICAT The Recruit above named was cautite would be liable to be punished as pro	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful good of the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity again of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. iconed by me that if he made any false answer to any of the above questivided in the Army Act.
I Is Majesty King pound, honestly and faithfully defend Hi ill enemies, according to the conditions CERTIFICAT The Recruit above named was cauti to would be liable to be punished as pro The above questions were then rea	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful good of the Fifth, His Heirs and Successors, and that I will as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity against of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. Cloned by me that if he made any false answer to any of the above questivided in the Army Act. ad to the Recruit in my presence.
The Recruit above named was cauti the would be liable to be punished as pro- The above questions were then rea I have taken care that he anderstan.	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful good of the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity against of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. Since by me that if he made any false answer to any of the above question to the Army Act. and to the Recruit in my presence.
are true allegiance to His Majesty King tound, honestly and faithfully defend Hill enemies, according to the conditions CERTIFICAT The Recruit above named was caution to the would be liable to be punished as proof the above questions were then real I have taken care that he understands replied to and the said recruit has made this.	BE AKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful good of the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity against of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. included by me that if he made any false answer to any of the above questioned by me that if he made any false answer to any of the above questioned by me that if he made any false answer to any of the above questioned to the Recruit in my presence. and to the Recruit in my presence. and signed the declaration and taken the oath before me and the declaration and taken the oath before me and the signed the declaration and taken the oath before me and the signed the declaration and taken the oath before me
I true allegiance to His Majesty King tound, honestly and faithfully defend Hill enemies, according to the conditions CERTIFICAT The Recruit above named was cautite would be liable to be punished as pro The above questions were then rea I have taken care that he understants replied to and the said recruit has me in thisday of. Signa	BE JAKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful george the Fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity again of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. ioned by me that if he made any false answer to any of the above questioned in the Army Act. ad to the Recruit in my presence. diseach question, and that his answer to each question has been that again and signed the declaration and taken the oath before my continuous and the signed the declaration and taken the oath before my continuous and that signed the declaration and taken the oath before my continuous and the signed the declaration and taken the oath before my continuous and the signed the declaration and taken the oath before my continuous and the signed the declaration and taken the oath before my continuous and the signed the declaration of the signed the declaration and taken the oath before my continuous and taken the oath before my continuous and taken the oath before my continuous and taken the oath of the signed the declaration and taken the oath before my continuous and taken the oath of the signed the signed the declaration and taken the oath of the signed th
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I recritity that this Attestation of the ulred forms appear to have been compl	BE JAKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful good of the fifth, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity again of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. icioned by me that if he made any false answer to any of the above questioned by me that if he made any false answer to any of the above questioned in the Army Act. ad to the Recruit in my presence. adds each question, and that his answer to each question has been that the lace and signed the declaration and taken the oath before me and the signed the declaration and taken the oath before me and the signed the declaration of the signed the declaration and taken the oath before me action and the signed the declaration of the signed the declaration and taken the oath before me action of the signed the declaration of the signed the declaration and taken the oath before me action of the signed the declaration of the signed the signed the declaration of the signed
I recritity that this Attestation of the ulred forms appear to have been compl	do make oath, that I will be faithful george the Fifth, His Heirs and Successors, and that I will as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity again of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. icioned by me that if he made any false answer to any of the above questioned by me that if he made any false answer to any of the above questioned in the Army Act. ad to the Recruit in my presence. In the second of
I read a special authority, such	George the Fifth, His Heirs and Successors, and that I will be faithful is Majesty, His Heirs and Successors, and that I will, as in d is Majesty, His Heirs and Successors, in Person, Crown and Dignity against of my service. TE OF MAGISTRATE OR ATTESTING OFFICER. included by me that if he made any false answer to any of the above questivided in the Army Act. and to the Recruit in my presence. In the second second question, and that his answer to each question has been that the case of Attesting Officer Control of Attesting Officer

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. months. Height inches Apparent age years. inches Girth when fully expanded. Chest Measurement inches Range of expansion. マンイカント製 製いごか Distinctive marks INFORMATION SUPPLIED BY Name and Address of next of kin Imels 10 | Relationship Particulars as to Marriage (a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage. (c) Present address. (d) Initials of Officer verifying entry. (d) (6) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Service not al-lowed to reckon for fixing the rate of pension Signature of Officers certi-fying correctness of entries Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. Army Rank Days Days Service towards limited engagement reckons from On 89 The Total Service forfeited as above.....

2 years 204 da

[date of discharge]

Pensions

Name: James Joseph Howlett No: 33/3

- 1. THEATRES OF SERVICE
 - (1) South African War

Date and port of disembarkation:

(2) World War I Newfoundland. U.K. France

Date(s) disembarked in U.K.

IF CANADA)
AND) Date(s) S.O.S. in U.K. for Canada
U.K. ONLY)
Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments: 9 December 1916. St. John's Mild.

3. Date of all discharges and reason: 30 June 1919 Demob.

4. Date and place of birth as per / March 1897 Goulds attestation paper:

5. Marital status: If married, Sugle name in full of wife:

- 6. Any other military service: Tul
- 7. Decorations, if any. Til.

30/4/58 · Clerk's Initials:

	∽ Regi	Casualty I ment or Corps	orm Active S	The state of the s	land	• • •
Rank		Howl		stian Name	Jan	us .
Religion	R.	e.		istment '9	vears	8 months
	9-12-16T	erms of Service (Duration			
the state of the s	motion to present r					
$\mathbf{Extended} \left\{ \begin{array}{l} \cdot \\ \cdot \end{array} \right.$	Re	engaged {	Qualificati	on (b) Frade and Rate		
Occupation.	0	anue	V 185	my Caplain	Sig	nature of Officer.
Date	Report From whom received	Record of promotions, r &c., during active service B.213, Army Form A.36, The authority to be quote	eductions, transfers, casualties, , as reported on Army Form or in other official documents, d in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official
Date	From whom received			11/11	17	documents
200		.	Embarked Disembarked Joined Battalion	Rover	12. 6.17	B 213
22.9.17	89 F. A.	Ad Alveol	Home to	ns. 146.R.S	219.17	El 916.
6-10-17	1 De Alle	hauste	reed	by CCS	5-10-14	10 Sidy
	2 Cousef	Ada 1	Daus	Househ	19-10-17	W 3034
23/11/17	29-9130	James 13	ase Depit	Ranen	2/1/1	Roce
297	och	From	Dn. 33-13-1	7	8.12.17	B213.
	89 Ja	ad Tour	riertio"	1. 44	28/2/18	€ 0 8290
my	167A	\rightarrow	100 mm		1-3-18	E. S 8562
0 /	11 ces	1	9	Section - Carrie	83/10.	820791

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c. (6228) W. 13863/M1477 2.400.000 1/17 McA & W Ltd Forms B./10314 (B. 886)

[P.T.O.

Horalett Report Record of promotions reductions, transfers, casualties, &c., during active service, as reported on Army Form B.313, Army Form A.36, or in other official documents. The authority to be quoted in each case. Remarks Date of Taken from Army Form B.213, Army Form A.36, or other official documents Place of Casualty Casualty From whom received G.H.Q. ard Echelon.



Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. iIc Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full Jame, Howlett

Regiment from which discharged Royal Newfoundland

Station	Date Ohn's N	awtoundland
	The JAN STREET	POT
	Medical Officer, Unit, or Comma	ic Hospital.?
	The Royal HEAD	QUARTERS OF
above description and details are, to the best of my	knowledge correct.	launu
I certify that the above named soldier signed t	the foregoing declaration in my pro	esence, and that the
Station	Date 14-6-19	
		(Rank)
(Soldier's signature in full) John X He	rolett	Pti.
I declare that I am the soldier referred to above statement are, to the best of my knowledge, correct		ained in the above
Nature and locality of civil employment required		
Place and date of soldier's birth Soulds	1st March 189%	y
Christian names of children		
Date and place of marriage		
Wife's maiden name in full		
Christian name of Mother Cetherine		
Christian name of Father John. Christian name of Mother Catherine		
Figure on discharge Mediam		
Descriptive Marks		
Color of eyes Blue		
Complexion Color of eyes Shee		
Color of hair on discharge Jight		
Height on discharge Feet 2		
Intended address Soulds. Bay Bul	Us Rd.	
Regimental number 32/3		



DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE IN THE

CANADA IN YOUR REPLY REFER TO FILE NO.

> DVA. 95-7-1. Vol. 1 WSR 7 (B) /BB

XXXXXXXXXX REPRESENTATIONS MUNICIPALITY NAMED IN COLUMN

ROYAL NEWFOUNDLAND REGIMENT

Name:

Service Number:

1. Date of Birth:

Date & Place of Appointment, Enlistment or Enrolment:

3. Unit on Appointment, Enlistment or Enrolment:

4. Theatres of Service:

or Discharge:

6th June.

or Discharge

Date & Place of Retirement

Rank or Rating on Retirement

James Joseph HOWLETT

3313

Not Stated.

9th December, 1916. St. John's, Newfoundland.

Royal Newfoundland Regiment.

CANADA ENGLAND & FRANCE.

30th June, 1919. St. John's, Newfoundland.

Type of Termination of Service: "Demobilization".

Private.

NOTE: This record is not valid without the imprint of the efficial stamp of the De-DEPARTMENT OF VETERANS' AFFAIRS JUN 6 1951 WAR SERVICE RECORDS Ottagarant -, Canad

H.M. Jackson. DIRECTOR. WAR SERVICE RECORDS. Extract from Daily Orders Rust 11 Unit The Reyal Mild. Regt. St. John's, July 4th, 1919.

The discharge of the undernated on denobilization has been approved by 0.0. Discharge Papet, with affect from 20-6-19.

3313 Pte. Jaa. Howlett.

C.R. 33/3

Extract from Daily Orders Part 11 Unit The Royal Hild. Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilisation has been APPROVED by 0.0. Discharge Depot with effect from 16-6-19.

3313 Pte. J. Howlett.

Extract from Dally Orders Part 11 Depot, St. John s, Date June 18th 1919.

3315, Pte. J. Howlett.

Roperted at Headquarters 1/6/19. ex "Corsican" which sailed Liverpool May 22/1919.

C.R. 3313

Extract from Daily Orders By Lt.Col. B.J.Barton, D.S.O. Commanding 2nd Battn. Royal Nfld. Regt. 10-3-19.

The undermentioned having reported back from 1st En. is taken on the strenght andposted to "H" Company

3313 Pte. Howlett, J.

from 8-3-19.

Squadron, Troop, Battery and Company Conduct Sheet. B 121. Signature of O. C. Company Enlistment Regimental Number and Name Good Conduct Badges, Service pay or proficiency pay Age on Place and Date Joined Joined Period of Joined Date of award or of order dispensing with trial Cases of Drunk-Date of Place Rank Names of OFFENCE REMARKS Offence Punishment awarded By whom awarded Witnesses Not on parade @ 7:50 m. Suf Kuman 2 days CB. To be carried over

C.R. 3313

Extract from Hominal Holl of the Royal Hills. Regt. 24-1-19.

the Unicreentlened who was transferred from B.E.P. to the 2nd Hno. Minchester, 19-1-19 and they repair lating.

3313 Pte. J. Howlett.

Extract from Telegram received from London, dated May 5th, 1918.

In answer to your telegram May 3rd #3513 Ptel Howlett at Base details France.

C.R. 3313

Extract from Telegram despatched to Synoptical, London, dated May 2nd, 1918.

Please infrom whereabouts of 3313 Howlett.



SICK AND WOUNDED N: C: O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

Fo. H. A. 22419.

C.R.3313

ARTILLERY - ROYAL HORSE & ROYAL FIELD

Adm, 3 Con. Dep. Le Treport 23rd April 1918.

236877 Gnr. Hay J. RFA. 124/28 P. U. O. 212481 Minikin F. H. U. C/122 Ede. SP. GSW. 154389 Robins on E. U. C/276 GSW. Shldr. R. (penet)

Dis. to Base Dtls. ex 3 Con. Dep. Le Treport 23rd April 1918.

680502 Bdr. Merchbank W RB. 104813 L/Bdr. McGowan R	A.B/276 Bde B/155 Army Bde. B/92 Bde. B/71 Bde. B/84 Bde	GSW. Hand Ankle L. a Arm and Neck. ICT. Legs. Concussion Effects of Gas.
191020 Gnr. Williams on J. W. 3956 Dvr. Korgan A.	A/58 Bde B/att.A.A.Sec. 34 DAG. D/286 Bde. H.Q. 1 Div	GSW. Back, Debility. Inj. to eye R.
2893 Gnr. Gee W	D/265 Bde. A/124 Bde. A/285 Bde.	Soalded Feet GSW.Back.
231863 Dvr. Brearley W. D w 214698 Chr. Barrow G. w 168422 Dvr. Snook A. R. w	A/168 Bde	Bronchitis.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H. A. 22419

Dis. to Base Dtls. ex 3 Con. Dep. Le Treport 23rd Apl'18.

3313 Pte. Howlett J.

1/R. Newfoundlands

Tonsilitis.

No. H. A. 22196

GSW. Hand R.

862

MACHINE GUN CORPS Dis. to Rase Dtls. ex 3 Con. Dep. Le Treport 18 Apl. 18

ICT Thumb R. 58 MGC. 4580 A/Cpl. Tait J. GSW Arm R. 45150 . Mann A.B. 153 MGC. 15767 Pte. Dingley H. 84890 Acher F.C..... Pediculosis 152 MGC. ... Cellulitis Arm L. 3 MGC1/8 R.Scots att.51 MGC.HQ. ICT.General Bryant W.A.... 6 Batt. MGC. GSW Chest 116538 . Halton R. GSW Thigh L. 25 MGC. 128619 . Wells A. Lac. Wd. Finger R. (acc) 189 MGC. 46174 Besley F. 71636 Jervis. P. GSW Bye L. .25 MGC..... 301932 . Longbottom H..... 21 MGC. Shell Concussion (FBI) 115579 . Naylor V.J. SW Head & Thigh L. 61 MGC. 117359 Richardson A. PUO: (Trench Fever)

1 W. Yorks att. 6 MGC. GSW Chin 21/171 . Wade H. 18382 . Cawley H. Impetigo 58 MGC. 75919 Cpl. Gilder F.C. 2 Tanks GSW ATM L. 9:287 Gnr.Lea C.H.... GRW Arm & Hand R.

233 MGC.

M.G.C.

HEWFOUNDLAND EXPROITIONARY FORCE

Revelley T.....

99914 . Ward R.

No. H. A. 22196

Adm. 7 Con. Dep. Le Treport 18 Apl. 18

.10 Lanes. Fus. att.17 Batt.

3313 Pto. Hewlett J..... Tonsilitis

C.R. 33/3

Extract from Deily Orders Part libit the Boyal Hild. Regt., St. John's, Dec.9th, 1917.

3313 Pte. Jas. Howlett.

Attached to the Strength from Dec.2th, 1918.

- C.R. 3313

Extract from Homismi Holl of Braft Ho. 25 Ambarbad Jouthompton 11/6/17
from 2/1st Homfoundland Regiment Howton-on-Lyr, to 1/1st Homfoundland Regiment B. 2.7.

3313 Pte.Howlett, J.J.

MP.

C.1 3313

extract from Officers and men Enberked St. John's 51-7-18

#3313 Pte. J. Howlets.

Officer Commanding, Headquarters.

Mrs. Richard Howlett of the Goulds, states that her son P. Howlett emilsted yesterday against her wishes.

She is afraid that she cannot do without his help as her husband is slokly, and her other son is getting married shortly.

For report on the circumstances.

21 December 1916.

Governor.

Seen Mr Amlete. She thinks war that a year in to Army who do har a and y good.

I Howlett PHO

7a. If the soldier claims previous service in

Note.—This Form is only to be folwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi, or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class Pr.; or P. (1), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chaleas, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. Royal Hewforen land Former Trade or Occupation & James 2. Rept. No. 33/8 3. Rank. Pl. 74. If the soldier claims previous service

2. Regtl. No. 33/3 3. Rank....

4. Name (Surname)	Uest go	iristian Names)	Army, he should state— (a) Former Regts. or Corps; with Regtl. Nos.	T still head to the still a st
5. Age last birthday.	21		(with both that for more)	45 HZ
6. Posted for duty on. in category (or gr	at, rade)			to essent to essent est roll author herita s
8. If the disability is an	n injury was it caused			127
(a) in action	(b) on field service	e ' .		
(c) on duty	(d) off duty?	interparate ex	(b) Date of Discharge; (c) Cause of Discharge.	. 51
9. If a Court of Inquir	ry was held on an injur	ry state:—	territoria de la compania del compania del compania de la compania del compania d	Z1
(a) When		to and other actions	(d) Particulars of Pension of	ANT SHELL SH
(b) Where		Secretary and a	(if any)	
(c) Opinion of Co	ourt	and the second section and a	and of histories of capacity of higher accompany.	
Note.—The foregoings seen by the Officer in cl	ng particulars are to be fille	ed in and A.F.B. 179 B (st	atement by the soldier) completed before	re the soldier
		are to be filled in by the	Medical Officer in charge of the case. I he case and to such information as may	
them he will take care to c in the invalid's military and disease.	onfine himself exclusively d medical documents. He forward for invaliding.	s are to be filled in by the to the medical aspect of t will also carefully distingu		e to venereal
them he will take care to c in the invalid's military and disease.	onfine himself exclusively d medical documents. He forward for invaliding.	s are to be filled in by the to the medical aspect of t will also carefully distingu	Medical Officer in charge of the case, I the case and to such information as may tish and clearly state when cases are du which invaliding is proposed to be s	e to venereal
them he will take care to coin the invalid's military and disease. 10. If brought (Other disabilities)	onfine himself exclusively d medical documents. He forward for invaliding, ties should be reported u	sare to be filled in by the to the medical aspect of the medical aspect of will also carefully distinguished disability in respect of spon in answer to quest M.	Medical Officer in charge of the case. I he case and to such information as may inshe and clearly state when cases are duwhich invaliding is proposed to be sion No. 19). If no disability enterest the control of the case.	e to venerea stated here. er " nil."
them he will take care to c in the invalid's military an disease. 10. If brought (Other disabilid	onfine himself exclusively d medical documents. He forward for invaliding, ties should be reported usability.	sare to be filled in by the to the medical aspect of t will also carefully disting disability in respect of spon in answer to quest Mr.	Medical Officer in charge of the case. I he case and to such information as may inshe and clearly state where cases are duwhich invaliding is proposed to be sion No. 19). If no disability enter the case of the case. I have been case of the case o	e to venerea stated here. er " nil."
them he will take care to on the invalid's military and disease. 10. If brought (Other disabilities) 11. Date of origin of di 12. Place of origin of di 13. Give concisely the the disability in so	onfine himself exclasively de medical documents. He forward for invaliding, ties should be reported usiability. (isability. essential facts of the far as it is recorded in taring on the case an	nare to be filled in by the to the medical aspect of the medical a	Medical Officer in charge of the case. I he case and to such information as may inshe and clearly state when cases are duwhich invaliding is proposed to be sion No. 19). If no disability enterest the control of the case.	e to venerea stated here. er " nil."
them he will take care to on the invalid's military and disease. 10. If brought (Other disabilities) 11. Date of origin of di 12. Place of origin of di 13. Give concisely the the disability in so History Sheet be relevant official do	onfine himself exclasively de medical documents. He forward for invaliding, ties should be reported usiability. (isability. essential facts of the far as it is recorded in taring on the case an	nare to be filled in by the to the medical aspect of the medical a	Medical Officer in charge of the case. I he case and to such information as majish and clearly state when cases are du which invaliding is proposed to be sion No. 19). If no disability enter the case are du charge of the case of the c	e to venereal stated here. er " nil."
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		(iii.) Climate in pre-war service	7
		(iv.) Ordinary military service before the war	A CONTRACTOR
rii Vii		(v.) Serious negligence or misconduct on the man's part.	bolg and
	14	(a). If not due to any of these causes, to what specific condition do you attribute it?	
cases such	15.	What is his present condition?	He complain of
ye, ear, ad throat, ities, &c., ialist's rest be		(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)	He complour of as
graphs possible;			
tion the			
be stated.			
			· · · · · · · · · · · · · · · · · · ·
			在1967年1月1日 - 1967年1月1日 - 1967年
	16.	Was an operation performed? If so, when and what was its nature?	
	17.	If not, was an operation advised and declined?	de de la Santa de Caración de Caración de la Caración de Caración
	18.	*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treat- ment was unobtainable?	
	19.	Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?	Reportue Airo
		The state of the s	1mr /
	20.	Do you recommend—	
		(a) Discharge as permanently unfit?	
		(b) Change to United Kingdom?	Street to the same and the street was the
		Note—(b) is only applicable to soldiers invalided at Foreign Stations.	Procurier Ceff: Rame Medical Officer in charge of case.
	Sta	tion Hazeley Down	Medical Officer in charge of case,
	Dat	te .23/4//19	
	it is	 Loss of teeth on or immediately after active service, should due to some other cause 	be attributed thereto, unless there is evidence that
	200		

14. State whether the disabilities are (a) attributable to (b) aggravated by

(i.) Service during the present war

Army Form B. 1794

(ii.) Previous active service...



FIRST NEWFOUNDLAND REGIMENT

Re

No. 3313

Name James J. Vorlet

.. Corps.

Questions to be put to the Recruit before Enlistment.
I. What is your name?
2. What is your full Address?
3. Are you a British Subject? 3.
4. What is your age?
5. What is your Trade or Calling? 5.
6. Are you Married? 6
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vac- cinated?
9. Are you willing to be enlisted for General Service?
10. Did you receive a Notice, and do you under-stand its meaning, and who gave it to you?
II. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted?
made by me to the above questions are true, and that it is a control of the above answers made by me to the above questions are true, and that it is a control of the above answers made. Signature of Witness.
ATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I
CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER. The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly externi
on this. Q. M. day of Signature of Attesting Officer L
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the:
Date
Place
† The signature of the Approving Officer is to be affixed in the presence of the Recruif. ‡ Here insert the "Corps" for which the Recruit has been enlisted.
* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of

Name	Jan	Applicable to all fan	ks. To corres	pond with entr	ies on the	Medic	al Histo	ry Sheet	
pparen	t age	19 years	8 mon	ths.) H	eight.		5	feet 8 / inch
Chest M	easuren	Girth when for		ded 8	inches	inel	ies		
Distincti	ve mar	ks	100	W.Ca					E148 .
	e digital sec	1	and the						
Iam pan	d Addr	INFORMA ess of next of kin	JOHN S	Relatio	R. BY	RE	PRI	20	ulds,
	1	v waste de	Part of the State of the State of the	ars as to M	arriage				
((a) Christi	an and Surname of Woman (2) Pres		ed, and whether Initials of O			v. (b) F	Place and	
	(a)	A4	(8)			c)			(d)
		13/	Particul	ars as to C	hildren				
	Chri	stian Names		•			Date	and Pla	ce of Birth
	7								
Corps in	Rgt. or	Promotion, Reductions.	1 1000	о́F∙.тне	Service	not al-		in Re-	
Corps in nich served	Rgt. or Depot		Army Rank	⊕F ATHE	Service lowed to for fixi rate of p	not al- reckon ng the pension	Service serve no ed to rec wards G	Licentine	Signature of Officers cer fying correctness of entries
nich served	Depot	Promotion, Reductions, Casualties, &c.	Army Rank	X 250	Service	not al-	Service serve no ed to rec wards G	in Restallow-ckon to a C. Pay	entries
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N9 3299



4/1st. NEWFOUNDLAND REGIMENT

Howlett

ALLOTMENTS

hereby agree, until further notification by me, and in similar official form to make an Allotment of

, Regl. No. 3313

Cents, per diem, from my Pay,

150
1000
7
unter- re the

Nº 3299





4/1st. NEWFOUNDLAND REGIMENT

nes Howlett

ALLOTMENTS

Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	(each	person)
	1 feero	Mos John Heartes	Burg Barro Rd		
		275	T.		
<u>.</u>			· .		
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	signed by the Office	r Commanding Company and har	Total Allotment, \$ ding Company, signed by the Volumended to the Paymaster as authority	teer, co	unter-
	Chasic C	Line Cest	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, y. **	

Place Date of award or of offence of the control of the control of the control of offence of offenc		Sheet]		Part Color Will Add Color	nd date t drunk Period not reckoning towards freedom from extra fine	Sheet No.	Signature O.C. Company, etc.	State of the state	Anual lost Cha	
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To Officer Commanding.

1/Nn. Royal Nfld. Regt.,

December 5th, 1918.

The reply to this Office No.

18225/555/P&A. 8/11/18, relating

to 3313, Pte. J. J. Howlett.

not having been received, you are requested to expedite the same, and to state on the reverse when it may be expected.

Major,

Chief Paymaster & 0 i/c Rcds.

Reference reverse: Postal Draft £2. 0. 0 is enclosed for payment as indicated. * Kindly obtainthis Soldier's recent heron, please.

jnuoma aini aadatw raiblos aint *** , Major, Onmet Paymasterm&:(001/6=Records=6 of

 TO:-

Chief Paymaster &.O.I/C Records, 58, Victoria Street, S.W.1.

3313. Pte.J.J.Howlett, C. Coy.,

This postal draft has become void before it could be handed to the above named, can attresh draft be sent out, please.

My)

Chief Paymaster &.O.I/C Records, 58. Victoria Street, S.W.I.

3313 a Pto 1111 How et IN CHIEF.

This marked draft her bette vold before it could be handel to the above named, can attract draft be sent out, please. 'cac' 'cac'

(Sgd) E.A.Matthew, Lieut.Col. Commanding let.Bn.E.nFl2 Regt. 2/11/18.0.0 .82 treiwoH EIEE ot yeq"

1/Bn. Royal Newfoundland Rgt. of

Reference reverse: Po tal Dualt 12: 0. 9 is enclosed for payment as indicated. Sindly obtadmentess; attalria recait hereon, classe.

This Soldier wishes this amount to be remitted toohim; pleases here.

(Sd),(I).W.S. Lt.Gol. Commanding 1st. Bn. R. NfldefRegtr

in King

CHIEF PAYMASTER & OFFICER HC. RECORDS. NEWFOUNDLAND CONTINGENT. BS. VICTORIA STREET, LONDON, SW. L.

O.C..

1st.Bn.Royal Nfld Regt. B.E.F.

WF MN

Pay & Record Office.

8th November.

3313.Pte.J.J.Howlett.

Reference attached: Amended Postal Draft is now enclosed for payment to the above named Soldier, please.

Kindly acknowledge receipt hereon.

Major Chief Paymester & O.i/c Rcds.

18225/555/P&A	
	CLOSURE Form C. BAR.
MEMORANDUM. GHIEE BAYMASTER & OFFICER I/C. REGORDS. REPRESENTATION AND COLUMN Room.	
B. VICTORIA STREET, B. VICTORIA STREET, LONDON, SW. 1. To 0:00.,	CHILLE FA.
lst.Bn.Royal Nfld Regt. B.E.F.	58, VICTORS SCHEEP, 14, 15, LOWDON, S.W. L.
TP/MN	ANSWER.
Pay & Record Office.	
8th November, 1918	Nov 19 th 1018.
3313.Pte.J.J.Howlett.	
Reference attached: Amended Postal Draft is now enclosed for payment to the	Postal deaft for 2 to.
above named Soldier, please. Kindly acknowledge receipt hereon.	5.9. Acaltina LEUT. COL.
Ad Minusell Mis	HEWFOUNDLAND CONTAGENT, 150 REGIMENT, PAY & RECORD, OFFICE.
Chief Paymaster & 0.1/c Rcds.	Hef. Los. 19 /0649
	tet, Nos. DUT
	ACTEL ACTEL
	$\begin{cases} \frac{L(x,y)(x)-D(x)}{C(y)dx} & \vdots \\ \frac{L(x,y)}{C(y)dx} & \vdots \end{cases}$
	R.& O. 1/2
	P.S.

ENGLOSURE

Army Form C. 347—1.

• 10 TO 10 T	REMINDER.
NEWFOUNDL	RAOFFICER IC. NECORDS. AND CONTINGENT, ORIA STREET, OON, S.W.1. ENGLAND.
To Officer 0	
/ 1/Bn. Ro	yal Nfld. Regt.,
	December 5th, 1918.
The reply t	this Office No.
	/P&A. 8/11/18, relating
292207000	/1000 10120111g
to 3313,	Pte. J. J. Howlett.
· · · · · · · · · · · · · · · · · · ·	L MENUTONIADI AND CONTRADION
*	PAY & RECORD OFFICE.
	Ref. Mos. 1. 11349
	1100'd 27 DIC 1916
not having been	received, you are requested
not having been	same, and to state on the
reverse when it	may be expected.
7	Those Major,
	Chall
	Paymaster & 0 1/c Rcds
(P10242) Wt. W5197/P696 2	50,000 2/18 W. 25 Forms/C347-1/5

18225/555/P&A.

1st.Bn. Royal Nfld.Regt., B. E. F.

WF/NM.

Pay & Record Office.

8th, November, 8.

3313, Pte. J. J. Howlett.

Reference attached: Amended Postal Draft is now enclosed for payment to the above named Soldier, please.

Kindly acknowledge receipt hereon.

Major, Chief Paymaster & O. i/c Rcds. Received from o.c.

C. Coy on 15 ch unt Portal Draft to the

value of \$2.0.0

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akuly

Capt. & Adft. THE BY ROYAL NEWFOUNDER fro.e.

13313.

The Koyal Pewfoundland Regiment

, and the second
DEMOBILIZATION OF
Reg. No 35/3 Rank Www. Name Wowlett
Date of Enlistment, () -12 16, Address Goulds, Wistrict It formal
Occupation Tarmer Classification for Discharge Medical Category A.
Recommendation S. M. B. Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. P 36
Date
PARTICULARS FOR DEMOBILIZATION
1. Civil Re-Establishment. I amin a position to resume civilian occupation.
as the dowlett to laton
Particulars passed to Vocational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:
(a) Clothing Allowance payable (1.05)
Date 16-6-19 Oilc. Re-clothing

The above named		Warrants No. 18 1810 to his hom
at Watels I	Arhuand Release Certificate No	o
7	-6-19 MOLTASLILLON	A Shawlesson Officer
4. Pay and Allowances.		A 200
The herein named nection therewith set		ectly balanced and all matters in con
Date		Depot Paypaster
Discharge approved for Forwarded with follow	wing documents to O.C. Discharge	Depot.
N.F. P 36	B 121	", 210mB
Date /6 - 6 - 19	TA STUBIONA 9 TO	O. C. Discharge Depot.
APPROVED.	militagrava militam vara militaria est	Control to the state of the sta
Documents as above fe	orwarded to:—	
Officer i	c Records. Pension Commissioners.	
with following additional	locuments.	ektiset och er objektimister i 198
JUN16 1919	Engible for War	Service Gratiny P.H. Jait E.f. O. C. Discharge Depot.
Pagaired the aking act 1.1	Albur I de la margant autor sobiele	4
received the spoke noted do	cuments from O. C. Discharge Del	ppt. 1/1 1/2 /2/

Reg. No. 22	19. Rank the Name Howlest Jas. Address Houlds.	
Attested	Address Youlds.	
Allotment	Allottee	
Date of Allotr	ment Returned from Overseas 19. 1. 19 S.S. LOUNGER Cause Sulhange	
Returned on S	is Courseau Cause Archarge	
14.6.19	PASSED TO LEMOSILIZATION OFFICER	
	DISCHARGE APPROVED ON DEMONSITIESATION.	
·		
		••• •• •••

Hay wepl.

June 30,1919

#3313 Fte.James Howlett.

Goulds.

St. John 's West.

Dear Sir:-

Please fin d enclosed Discharge

Certificato No. 2505.

Yours truly

Captain

Payma ter & 0.1/c Records.

The Koyal Alld. Regiment DEMOBILIZATION

No.33/3 Rank

Name Mawles

Warned for demobilization on

JUN 16 19

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE
I. No. 33/3 Rank Ite Name Howlett, J. Intended place of residence Goulds St. John.
2. Occupation Lormes DT
Classification of soldier
3. The above named man is discharged in consequence of DEMOBILIZATION.
Engible for War Service Grandly
4. His accounts are correctly balanced and I have impartially inquired into all matters bright before me, in accordance with Regulations. Place Comanding Discharge Depot Rae Royal Newfoundland Regiment
CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE
5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
Place and date ST. JOHN'S Simula of colding
Signature of solutions,
JUN 1 6 1919. Signature of witness
CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER
6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
Place and Date ST. JOHN S Significant of soldier
JUN 14 1918 Jun Signature of witness
STATEMENT OF SERVICE
7. Enlisted for service 9-12-16 No of days on Military
Discharged from service. 16. 6-19 PLUS 14 DAYS Service 934
APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Records. The Royal Newfoundland Regiment, twenty-eight days from date.
Place ST. JOHN'S: Officer Commanding Discharge Depot
JUN 16 1919 The Royal Newfoundland Regiment.
Date
O. The discharge of above mentioned soldier is hereby confirmed by
Place April Med Motocoteyloapt
Date June 30/1919. The Royal New bundland Regiment

atBeorg/2505

THIS TICKET TO BE SHOWN AT THE GANGWAY AND RETAINED BY THE SOLDIER

The Royal Pewfoundland Regiment DISEMBARKATION TICKET

No. 3313 Rank Pte Name Nowless:
Address Water food Brilly Rd

PASS. You are granted permission to be absent from Depot until JUN 14 1919 on which date you will report

for demobilization, (see over)

ST. JOHN'S, N.F.

Confidential Information

For the use of the Civil Re-establishment Committee.

Report No.	Class			No. of C.R.C. File H.				
				+ +				
Name H	weett	; \$	No 33/3 Rant	Pte	R. N. R. or Regiment.			
Home Address	Gould	~ 0A	1. To Meny Address					
Age. 23. Heigh	t. 5. ft. 7 ins. Co	omplexion	And Exes blue H	air. Char	acto			
Date of enlistment.	9-12-16	Where en		Where seen service.	gree			
Ship returned by	ORSICAN	Date of	return JUN (4 - 1919	How Long	3/240			
Birthplace	ones &	Date of	discharge	Religion	KK.I			
Name and address in	ext of kin	٠,,	John - 4	meds.				
Cause of disability			·()					
Condition which pre-	vents the soldier from e	arning a fu	ll livelihood	AAirraini,				
Degree of incapacity	(Please state in fraction	ns) Eng. B	oard 1	Newfoundland Boar	1			
Probable duration of	incapacity							
Is final disability like	ely to prevent return to	previous o	ecupation?					
Recommendation of	Newfoundland Board							
Members of Board								
	INFORMATION 7	TO BE F	URNISHED BY SAILOR	OR SOLDIER				
DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH			
Wife								
Children 1								
3								
4	1							
5	- J			1 1				
Occupation prior to		- me	<u> </u>					
	ofession	14.			••••••••			
Name and address of	evious to enlistment	7 / '	Self Any on					
If in receipt of sick		ance—name	of society					
At what age left sch			hat grade, standard, &c., was I					
Has he had any fur	ther education since lea	aving school	ol, if so what?	,				
			in England. If so, what subject	ts?				
If unable to follow	previous occupation, na	ame prefer	ence					
References	0.0		<i>J</i>					
Witness W	NO Oal	A	I declare that the	ve statement is cor	rejet./			
	116		Signature	to x	Nowlett			
Date				Men				
	Recommendation by Int	terviewer a	s to classes likely to be of use	, and general remar	ks:			

First Payment date.....

Civil Re-establishment Committee

I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation.

Howlett J.
Signature of Man.

Reg. No33/3

Signature of the Vocational Officer or his Representative.

Place Ll Jahus

Date 16—18 191

The Koyal Pewfoundland Regiment

Reg. No. 35/3 Rank Mane Wowlett &
Date of Enlistment O 18 16 Address Goodels Vistricy Hathas
Occupation Tarmer Classification for Discharge
Recommendation S. M. B. Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. 136 B 268 B 121 N.F. Med D.F. 1
B 178 W 3494 B 122 Board 1st " 2
B 178a / D 400A / B 1915 do 2nd " 3 3
B 179 D 400B Form L do 3rd 4 4 B 179a D 400C Form K do 4th 5
B 179b B 103 / ME 2 " 6 "6.
B 179e
Date
Date
PARTICULARS FOR DEMOBILIZATION
The state of the s
PARTICULARS FOR DEMOBILIZATION
PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment.
PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment. I amin a position to resume civilian occupation. Aus How Lett Malory
PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment. I amin a position to resume civilian occupation. Particulars passed to Vocational Officer for information and action.
Particulars for DEMOBILIZATION 1. Civil Re-Establishment. I am
PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment. I am
Particulars for DEMOBILIZATION 1. Civil Re-Establishment. I am

3. Transportation and Release Certificate.	
The above named has been provided with Travelling Warrants No 1810.	to his home
at. prices if the sand Release Certificate No. 2835 issued.	
Date 11-6-10 was and frame of	1
Demobilization	Officer
The state of the s	CHIQCI DELL
4. Pay and Allowances.	Have south
The herein named soldier's accounts have been correctly balanced and all mat nection therewith settled. He has received pay and allowances to	ters in con-
The state of the s	F 191
Date	W H
// / /a	Jaster.
Discharged approved for	
Forwarded with following documents to O.C. Discharge Depot.	
N.F. 1/36 B 268 B 121 N.F. Med D.F. 1	to the state of
B 178 W 3494 B 122 Board 1st " 2	
B 178a D 400A B 1915 do 2nd " 3 2	mB.
B 179 D 400B Form L do 3rd	
B 179a	
B179c B 120 M 93	
16-6-19 EMOHILLARS FOR DEMONITURATED -9-11	
Date O. C. Discharge I	m Problems Communication
In the group was it the party and the same a	Sebor.
APPROVED.	
Documents as above forwarded to:	
Officer i c Records. Board of Pension Commissioners.	
with following additional documents.	
Bligible for War Service Grand	
	ty .
Trul decime	apl.
O. C. Discharge 1	Depot.
Received the above noted documents from O. C. Discharge Depot.	
(c) (b) Clothaga Supposed [S. 17] as a second control of the contr	
Date	la seas

The Royal Pewfoundland Regiment

Class for Demobil-

ization:	Travelling Board, held on soldier for discharge.
Discharge Depot: Headquarters The Royal Ne	wfoundland Regiment
	Date 14.6.19
Regimental No 33/3	
Name Howlatt Jas.	Rank Pto
Name Howlatt Jas. Address Gould	<u>s-</u>
Present Medical Category A: 7	
. Recommended for :—	(a) Immediate discharge(b) Standard Medical Board
•	R.H.Jait Major O.C. Discharge Depot.
Members of Board	Senior Medical Officer
	M. U. Depot

0, & Co. 2,000—3-15.		Reprin Ari	t for 1st Nfld. Regt. of ny Form B. 178a.
Regulan Army.	Reserve Recruits, and for Special	al Reservists enl	isting into the
Surifame Howlett	OF Christian Name	James	E0
	Table 1.—GENERAL TABLE	13 JUN	1917
Birthplace:—Parish	SPECIAL RESERVE.	REGULAR	ARMY
Examined	on 9 day in the 1916	on day of	191
Declared Age	19 Jeans 8 has days	years	days
Trade or Occupation	Tarmer inches	er feet	inches
Weight	15 16s.		lbs.
Chest Measure-ment Girth when fully expanded Range of expansion	3 inches		inches
Physical Development	Right Left	Right	Left.
Vaccination Marks Arm Number			
When Vaccinated			
Vision	R.EV	L.EV==	Now a
	(a)	(a)	
(a) Marks indicating congenital peculi- arities or previous disease		1	
	(b)	(b)	
(b) Slight defects but not sufficient to Cause Rejection			•
Approved by (Signature)	Vamore Paterson		
(Rank)	mayor		
· · · · ·	at & Joan's Medical Officer.	at	Medical Officer.
Enlisted	on 9 day of OR 196	on day of Corps.	Regtl. No.
Joined on Enlistment	3/10/1/es. 35/13	:	7.00
Transferred to	· 0		
Became non-effective by			. !

(Signature)

191

P.T. o.

Table II.—Only for admission to hospitator to the sick list in case of Warrant officers treated in quarters.										
Name of Hospital.	1	dmitte Hospi Honti	rd to tal Year	10000	harged Hospita Jonth	1400 10000	Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of spiblilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special spiblile case sheet.	Signature of Medical Officer
ellie Blospe, Hieren.	28	\ \	19		,,,	19	Consider .	*+0 ***	Adulter with punched wheret dielitze is which grown wir durationed. There in it is my is sof 11700. It is right in	Clampa Cont
MILBEA. HANTE	23	دو	19	22	. 4	19	Gondon	3/	Krhou ing Tr & njoi wie	Of Confine Con Of Confine Con Or core
•	4					-				
						,	1 1 _{1,00}	5		
	4					V V				

Table III.—Boards: Courts of Inquiry, Vaccinators, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date

Brief Details, and Signature

•••		Question and the second
\$ 10° 13 17.	7 mg 40 3 40 3 90	
	vace so	
		This harshy and a 20 mg.
		His hereby correspond that this soldier has been b f in a Travelling M. dioni. Board and his been class to as
		tion. Medical orte gory All
3		Date of Tariff

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
All Horizon	6- 31/12	Febral V		- 4	
Windson As	20.3/1	1-11		100	
windsor son .	0477				
		10			
		\$ 1			1
		×.	90.000		
. 27.9			•		

Note:—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (kvi., or xvia.); King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (1), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

Transfer to	Class W., W. (T), P	., or P. (T), of the Reserve.	•
1. Unit and Corps.	vya nutaundea	7. Former Trade } levery For Occupation }	~~
2. Regtl. No. 33/3	3. Rank	7a. If the soldier claims previous service Army, he should state—	in
4. Name Nowle (Surname)	H James (Christian Names)	(a) Former Regts, or Corps; with Regtl. Nos.	
5. Age last birthday	. <i>2.1</i>	(美國語 新安田多	
6. Posted for duty on.	at		i de di restri
in category (or gr	ade)		
8. If the disability is an	n injury was it caused		
(a) in action	(b) on field service	*	
(c) on duty	(d) off duty?	(b) Date of Discharge;	
		(c) Cause of Discharge.	
9. If a Court of Inquir	y was held on an injury state:—	gy one because apparationed and the P. R	
(a) When		(d) Particulars of Pension or Gratu	uity
(b) Where	12,504(B) 76 4 1,464 45	(if any)	
(c) Opinion of Co	ourt	170 m (statement by the soldier) completed before the sol	ldier
Note.—The foregoing is seen by the Officer in cl	ng particulars are to be filled in and A.F.D. harge of the case.	179 B (statement by the soldier) completed before the sol	
	Statement of	Case.	
them he will take care to co in the invalid's military and disease.	to the following questions are to be filled it onfine himself exclusively to the medical and d medical documents. He will also carefull forward for invaliding, disability in ra	in by the Medical Officer in charge of the case. In answe spect of the case and to such information as may be reco ly distinguish and clearly state when cases are due to ven- spect of which invaliding is proposed to be stated h	ereal
(Other disability	ties should be reported upon in answer	to question No. 19). If no disability enter "nil.	
	Benefit of the second of the second	w	
11. Date of origin of di	sability.	insylvenia and of the	
12. Place of origin of d	isability.	wind the second second second	
the disability in so	essential facts of the history of far as it is recorded in the Medical aring on the case and in other ocuments.	with the state of the last of the same of	

14.	State whether the disabilities are	(a) attributable to	(b) aggravated by
	(i.) Service during the present war		7.4
	(ii.) Previous active service		
	(iii.) Climate in pre-war sérvice		
	(iv.) Ordinary military service before the war		
	(v.) Serious negligence or misconduct on the man's part.	VDG Cone	5 - 1 - 1 - 1 - 1
14	(a). If not due to any of these causes, to what specific condition do you attribute it?		
such 15.	What is his present condition?	he for pla	ins And
hroat,	(A note should be made as to Weight in all cases when it is likely to afford evidence of the pro-	JAC CON 9-CO	0.
o be with a pla s sible; ses of the sition	gress of the disability.)	he Compea Disacu	45-
rated.			•
		- proposition	
16.	Was an operation performed? If so, when and what was its nature?		
17.	If not, was an operation advised and declined?		gid to a natural
18.	*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treat- ment was unobtainable?		en e
19.	Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?	\$ in the control of t	
	ρ	e e (f. 1915) e propiet de la companya de la compa	•
	Kipa .	trialin	
20.	Do you recommend—		To store the control of a con-
	(a) Discharge as permanently unfit?		* *
	(b) Change to United Kingdom?		
	Note—(b) is only applicable to soldiers invalided at	\sim	
	Foreign Stations.	June 1	Com
	<i>(</i>)	(. Mouries	, cap Kam
Stat	ion Hozely Down	Medical Officer in c	harge of case.
Dat	e 23 / 4/19		
it is	• Loss of teeth on or immediately after active service, should ue to some other cause	d be attributed thereto, unle	ess there is evidence that

:Wi & mar ton

July 2,1919

#3313 Pte. James Howlett,

Goulds.

St. John's west.

Dear Sir :-

Referring to your application

I enclose cheque for seventy dollars (\$50.00%,
being amount of first payment due you on
account of the "War service Gratuity."

Yours truly

Captain, - symaster & Officer i/c Macords.

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DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th.1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no deshes, If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C

Christian name Asset of Fitter, ST. JUHN'S.
Undistrin home, J
3. Renk
6. Address in full to which future payments of frattity are to be
forwarded youlds of plus west
La Samina
6. Date of enlistment in the Regiment
7. Name of dependent, if any, to whom Separation Allowance is being
issued, or was being issued, immediately prior to your discharge
······································
8. Relationship of such dependents
9./ddress in full of such dependents

10. Is said dependent, now, or was said dependent at any time in receipt
of Someration Allowance on account of mether soldiers
11. Were you on active service only in liftld. If so, give dates and
particulars of such service. OFFREAS
·230

12. Give total length of time which au served on active service.
whether in 141 d. or Overses Tom Dec 9/16 4
xuae 10/19

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-onlistments, and under what regimental numbers.
The state of the s
• • • • • • • • • • • • • • • • • • • •
14. Have you already received any payment of Post Discharge pay or
War Service Gratuity? If so, state amount you and your dependents
have already received and by whom paid
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the Imperial Boroes
17. Are you entitled to receive, or have you received any Gratuity
in the nature of Post Discharge Pay from the Imperial Forces? If
so, state amount received, or to which you are entitled
18. Did you revert Overseas to a rank lower than the substantive
rank held by you on your arrival in England?
(b) If so, was such reversion in consequence of Misconduct or
inofficiency?
19. Are you now berving in the Rest.? If not give? - (a) date
of discharge file to for Reason Low discharge file from
Alle portary News belogge con
20. Did you at any time serve at the front in an actual theatre of
War? If so give particulars of places, and dates of such servite
ance Relgeau flermany - From
Jane 1917 to all 1919
21.(c) Are you receiving treatment from the Wivil Ro-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
that Committee
And I rake this solenn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

3 Signature of Applicant:/ Place of Residence: Declared before me at day of This Signature of Barrister of the Supreme Court, Stipendiary Maris-trate; Notary Public, Mustice of the Peace, or Commissioner of affidevits. POST DISCHARGE PAY. Net amount Boldier. Dependent. War Service Date paid Baid due Cortified correct. Paymaster

ST. JOHN'S, JUN 1 6 1919

Royal	Newfoundland	Regiment.
Billeting Acco	To Ph Jo	lowlett
Billeting Soldiers	as undermentioned	/119
33/3	Pt & Hunler	tt 11. 6
•	IND LESS	
Certified correct for	or \$ 1660	Je.
tr. A	J. Hollott	cer.

Nº . 3299



4/1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No. Whether Wife, Child other Relative or Friend		NAME (in full)	Address	AMOUNT (each person)	
172	Mother	Mrs John Hawlett	Soulds	/	50
			Bou Buelo Rd		
		75 T 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Service Servic		
	394				
					-
9			· 100		
			Total Allotment, \$		